

Work Order ID 107599

September-27-13 12:55:01 PM

107599

Page 1

Item ID: D3007-041

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: Prop Assy

Stop

NS2

Start Date: 9/27/13 Start Qty: 2.00

2

Cust Item ID:

Required Date: 9/27/13 Req'd Qty: 2.00

2

Customer:

Reference:

Approvals: Process Plan: MLSDate: 13-09-30

Tooling: _____

Date: _____

Run

Start

NR1

QC: _____

Date: _____

SPC (Y/N): _____

Date: _____

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
100		0.00							
100	Small Fab								
Small Fab	Memo	0.00							
Small Fab	Assemble as per Dwg D3007								
110	QC5- Inspect part completeness to step on W/O	0.00	DAS 27 9-89						
110	Memo	0.00	13 10 22	C					
QC									
Quality Control									
120	Identify as per dwg & Stock Location: <u>ST 259</u>	0.00							
120	Memo	0.00							
Packaging									
Packaging									
			Z						
			DAS 33 9-89						
			13-10-23						

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
Part No. _____	Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>					
NCR No. _____	Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>					
	Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Composite <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other			

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Page 2

Item ID: D3007-041

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Revision ID:

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Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

**Sequence ID/
Work Center ID**

**Operation
Description**

**Set Up/
Run Hours**

Tool ID

Tool #

**Plan
Code**

**Accept
Qty**

**Reject
Qty**

**Reject
Number**

**Insp.
Stamp**

130

QC21- Final Inspection - Work Order Release

0.00

130

QC

Quality Control

Memo

0.00

*JJ / P/ 13-10-24
MF
13-10-23*

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: Date:

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause		Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data	<input type="checkbox"/>										
Equip/Tooling	<input type="checkbox"/>										
Operator	<input type="checkbox"/>										
Material	<input type="checkbox"/>										
Setup	<input type="checkbox"/>										
Other	<input type="checkbox"/>										
Process	<input type="checkbox"/>										
Supplier	<input type="checkbox"/>										
Training	<input type="checkbox"/>										
Unapproved	<input type="checkbox"/>										
FAULT CATEGORY											
Landing Gear				General							
Bending <input type="checkbox"/>	Centre Not Concentric to O/S <input type="checkbox"/>	Bend <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>						
Cracks <input type="checkbox"/>	Crushed/Crimped <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>						
Cuffs <input type="checkbox"/>	Heat Treat <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>						
Inspection Strip in Tube <input type="checkbox"/>	Ripples in Bend <input type="checkbox"/>	Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>						
Torque Waves in Extrusion <input type="checkbox"/>	Turning Sequence <input type="checkbox"/>	Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Moved <input type="checkbox"/>							
Wave/Twist in Tube <input type="checkbox"/>		Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>							
		Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>							
		Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>	Other <input type="checkbox"/>							
		Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>								
		Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>								
		Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>								

Picklist Print

September-27-13 12:55:00 PM

Page 1
3

Work Order ID: 107599

Parent Item: D3007-041

Start Date: 9/27/13

Required Date: 9/27/13

Parent Item Name: Prop Assy

Start Qty: 2.00

Required Qty: 2.00

Comments: IPP B01.05.18Changed pick list (ECN 354)EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D3007-1 Strut		Manufactured	No	107667		100	Each	0.0000	1	2	FF	13-10-22	X
D2012-107 Clevis		Manufactured	No	105277		100	Each	3.0000	1	2	FF	13-10-22	
					<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>				
					WA004		3						
					101246		3						
D2022-101 Spacer		Manufactured	No			100	Each	223.0000	2	4	FF	13-10-22	
					<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>				
					ST004		223						
					100480		6						
					103016		60						
					105085		40						
					106235		24						
					92861		33						
					98450		60						
AN4-10A BOLT		Purchased	No			100	Each	53.0000	1	2	FF	13-10-22	
					<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>				
					ST355		49						
					M126105		49						
					ST356		4						
					122800		4						
AN960JD416 Washer	NAS1149D0463J	Purchased	No	126221		100	Each	0.0000	1	2	FF	13-10-22	X

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: Date:

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS					
Part No. _____	Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
NCR No. _____	Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
	Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Composite <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data										
Equip/Tooling										
Operator										
Material										
Setup										
Other										
Process										
Supplier										
Training										
Unapproved										
FAULT CATEGORY										
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Picklist Print

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Page 2

Work Order ID: 107599

Parent Item: D3007-041

Parent Item Name: Prop Assy

Start Date: 9/27/13

Required Date: 9/27/13

Start Qty: 2.00

Required Qty: 2.00

MS21042L4

Purchased

No

100

Each

3,594.0000

1

2

FF 13-10-22

Locknut

	<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
	FP001	50	
	122452	38	
	8182	12	
	ST314	9	
	m125708	9	
	st507	33	
	m126073	33	
	ST509	3079	
	m126275	3079	
	ST510a	258	
	m126333	258	
	ST518	165	
	124231	165	

D2705

Manufactured

No

100

Each

3.0000

1

2

FF 13-10-22

Support Bracket

	<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
	ST016	3	
	36329	1	
	62357	2	

SL69-BS

Ball Stud

Purchased

No

100

Each

150.0000

1

2

FF 13-10-22

	<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
	GA	96	
	M126094	96	
	ST397	54	
	118145	54	

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: Date:

QA Closed: _____ Date: _____

Picklist Print

September-27-13 12:55:00 PM

Page 3

Work Order ID: 107599

Parent Item: D3007-041

Start Date: 9/27/13

Required Date: 9/27/13

Parent Item Name: Prop Assy

Start Qty: 2.00

Required Qty: 2.00

D3015-3
Locknut

Manufactured No

100 Each 111.0000

1 2 FF 13-10-22

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
-----------------	----------------	-----------------

FG	10	
95758	8	
96151	2	
ST023	101	
95758	16	
97511	85	

AN960JD516
Washer

NAS1149D0563J Purchased No

100 Each 2.0000

1 2 FF 13-10-22

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
-----------------	----------------	-----------------

ST504	125807	2
	1069059	2

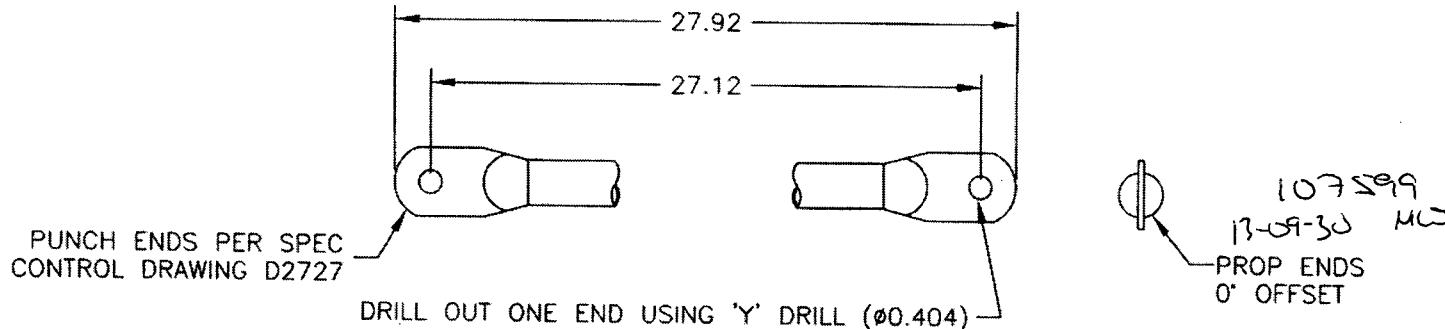
NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

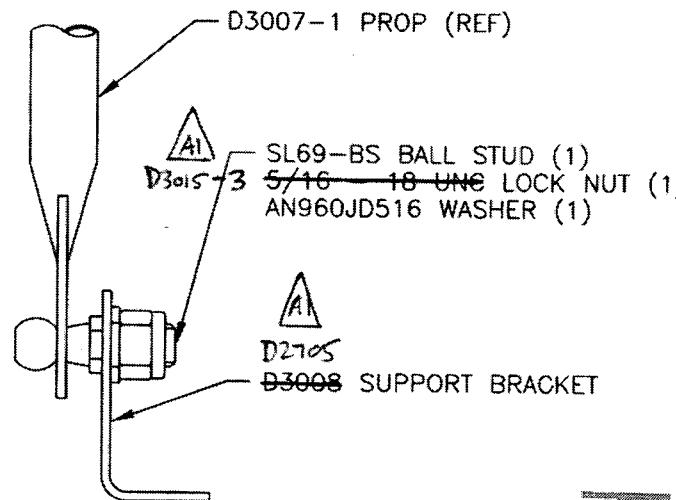
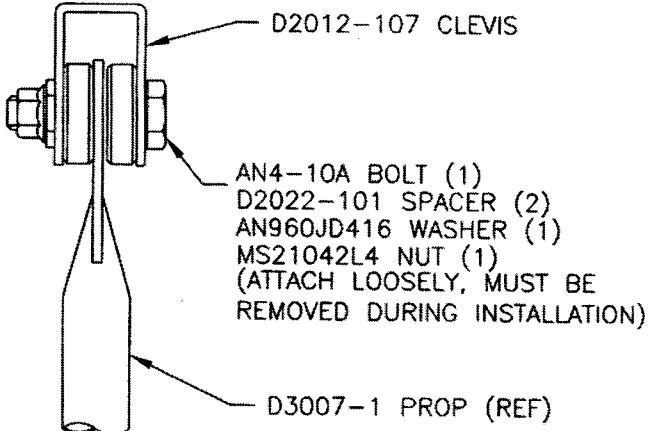
QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS						
Part No. _____	Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>					
NCR No. _____	Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>					
	Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Composite <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Other		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled	



D3007-1 PROP

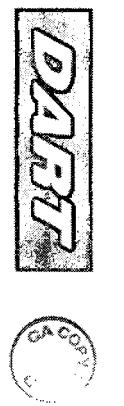
MATERIAL: AISI 304/316/318 SS TUBE, $\varnothing 0.50 \times 0.035$ WALL
ENSURE SEAMLESS TUBE IS USED
CAN MAKE FROM D2704



D3007-041 PROP ASSEMBLY

GENERAL NOTES

TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED
ALL DIMENSIONS ARE IN INCHES



DESIGN	DRAWN BY	DART AEROSPACE LTD	
CHECKED	APPROVED	HAWKESBURY, ONTARIO, CANADA	
DATE		DRAWING NO.	REV. A
01.03.22		D3007	SHEET 1 OF 1
A	01.03.22	PROP ASSEMBLY	SCALE 1:2
A1	01.03.22	NEW ISSUE	
		RELEASED 01-03-01	
		D3015-3	